

Candidate Intention Statement

Type or Print in Ink.

CITY OF GOLETA
 CALIFORNIA
 APR 08 2014
 RECEIVED

CANDIDATE INTENTION STATEMENT
CALIFORNIA FORM 501
 For Official Use Only

Check One: Initial Amendment (Explain) _____

1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) Perotte, Paula A. DAYTIME TELEPHONE NUMBER (805) 685-8535 FAX NUMBER (optional) () E-MAIL (optional) Paula.perotte@cox.net

STREET ADDRESS 7847 Rio Vista Drive CITY Goleta STATE Calif. ZIP CODE 93117

OFFICE SOUGHT (POSITION TITLE) City Council member, City of Goleta AGENCY NAME _____ DISTRICT NUMBER, if applicable. _____ NON-PARTISAN

OFFICE JURISDICTION _____ PARTY: _____

State (Complete Part 2.) City County Multi-County: _____ (Name of Multi-County Jurisdiction) 2014 (Year of Election)

2. State Candidate Expenditure Limit Statement:

(CalPERS and CalSTRS candidates, judges, judicial candidates, and candidates for local offices do not complete Part 2.)

(Year of Election) **Primary/general election** _____
(Year of Election) **Special/runoff election**

(Check one box)

I accept the voluntary expenditure ceiling for the election stated above.

I do not accept the voluntary expenditure ceiling for the election stated above.

Amendment:

I did not exceed the expenditure ceiling in the primary or special election held on: ____/____/____ and I accept the voluntary expenditure ceiling for the general or special run-off election.

(Mark if applicable)

On ____/____/____, I contributed personal funds in excess of the expenditure ceiling for the election stated above.

3. Verification:

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on April 8, 2014
(month, day, year)

Signature Paula A. Perotte
(Candidate)